

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M. G		5/27/00
O.I.P.E. CLASSIFIER			6/5/00
FORMALITY REVIEW		6483	8/1/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	4/22/00
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY